Declassified CIA Documents Reveal Plans to Control Human Behavior Through Chemicals Covertly Delivered via Vaccinations

Fri 3:13 pm +00:00, 13 Mar 2026 2

posted by ian

Declassified CIA documents reveal that in 1952, U.S. intelligence officials were exploring chemical methods to influence and control human behavior.

An April 24, 1952 memorandum titled *"Special Research for Artichoke"* proposes developing drugs capable of inducing anxiety, depression, hopelessness, nervousness, and lethargy in "subjects." It discusses both immediate-use drugs and substances designed for long-term administration over extended periods, to be concealed in food, water, beverages — and even "**standard medical treatments such as vaccinations, shots, etc**."

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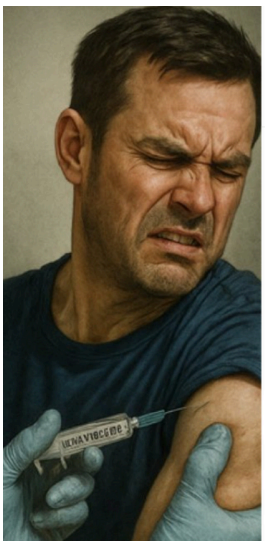

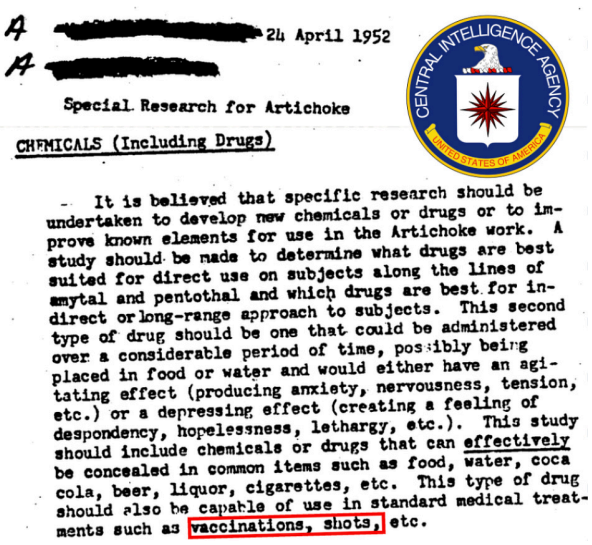

24 April 1952

Special Research for Artichoke

I. CHEMICALS (Including Drugs)

- It is believed that specific research should be undertaken to develop new chemicals or drugs or to improve known elements for use in the Artichoke work. A study should be made to determine what drugs are best suited for direct use on subjects along the lines of amytal and pentothal and which drugs are best for indirect or long-range approach to subjects. This second type of drug should be one that could be administered over a considerable period of time, possibly being placed in food or water and would either have an agitating effect (producing anxiety, nervousness, tension, etc.) or a depressing effect (creating a feeling of despondency, hopelessness, lethargy, etc.). This study should include chemicals or drugs that can effectively be concealed in common items such as food, water, coca cola, beer, liquor, cigarettes, etc. This type of drug should also be capable of use in standard medical treatments such as vaccinations, shots, etc.

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Project ARTICHOKE focused on interrogation techniques, hypnosis, amnesia, and chemical incapacitation within the CIA's Technical Services Staff. The program laid groundwork for MK-ULTRA, formally initiated in 1953 and later exposed during congressional investigations in the 1970s.

Disturbingly, since 2021, over 70% of humanity received a neurotoxic agent masquerading as a "vaccine". The same goals outlined in the CIA document (vaccines/drugs capable of covertly inducing anxiety, depression, and lethargy) are now being observed in COVID-19 vaccinated populations.

Multiple peer-reviewed studies have now linked the COVID shots to increased risks of:

1. Cognitive impairment (+137.7%)

2. Depression (+68.3%)

3. Anxiety disorders (+43.9%)

4. Sleep disorders (+93.4%)

5. Alzheimer's (+22.5%)

6. Ischemic stroke (+44%)

7. Hemorrhagic stroke (+50%)

8. Transient ischemic attack (+67%)

9. Myelitis (+165%)

10. Myasthenia gravis (+71%)

According to two recent VAERS studies, CDC/FDA safety thresholds were breached (PRR ≥ 2 compared to flu shot) for 146 brain, spinal cord, and psychiatric disorders, some of which include:

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1. Creutzfeldt–Jakob disease (CJD) — 847× more likely to be reported vs. flu shot

2. Brain clots – 3,000× more likely

3. Dementia – 140× more likely

4. Suicidal thoughts – 150× more likely

5. Homicidal ideation – 25× more likely

6. Psychosis – 440× more likely

7. Herpes zoster meningitis — 1,200× more likely

8. Toxic encephalopathy — 157× more likely

9. Schizophrenia – 315× more likely

10. Depression – 530× more likely

11. Brain abscess — 120× more likely

12. Violent behavior – 80× more likely

13. Cognitive decline – 115× more likely

14. Delusions – 50× more likely

The mRNA shots appear to disrupt the blood–brain barrier, allowing mRNA, amyloidogenic spike proteins, and pathogens to penetrate the brain and spinal cord — an outcome consistent with the now surging rates of cognitive decline.

Yes, these numbers are unfortunately real. Here are the studies:

1. Association between COVID-19 Vaccination and Neuropsychiatric Conditions

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International Journal of Innovative Research in Medical Science (IJIRMS)
Volume 10, Issue 06, June 2025,
https://doi.org/10.23958/ijirms/vol10-i06/2090

Original Article

Association Between COVID-19 Vaccination and Neuropsychiatric Conditions

James A Thorp, MD [1], Claire Rogers, MSPAS, PA-C [*2], Kirstin Cosgrove, CCRA [3] Steven Hatfill, MD M Med [4], Peter Breggin, MD [5], Drew Pinsky, MD [6], Peter A McCullough, MD, MPH [7]

PEER-REVIEWED STUDY FINDS
mRNA "VACCINES" LINKED TO 86
SERIOUS NEUROPSYCHIATRIC DISORDERS
HOMICIDAL IDEATION 25× MORE LIKELY
SUICIDAL THOUGHTS 150× MORE LIKELY
SCHIZOHREMA 315× MORE LIKELY
BRAIN CLOTS 3,000× MORE LIKELY
DEPRESSION 530× MORE LIKELY
VIOLENT BEHAVIOR 80 MORE LIKELY
COGNITIVE DECLINE 115 MORE LIKELY
DELUSIONS 50× MORE LIKELY

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2. COVID-19 mRNA vaccination: implications for the central nervous system

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Original Research Article

COVID-19 mRNA vaccination: implications for the central nervous system

Kirstin Cosgrove[1-3]*, James A. Thorp[1,4], Claire Rogers[3], Steven Hatfill[5], Nicolas Hulscher[6], Peter A. McCullough[3]

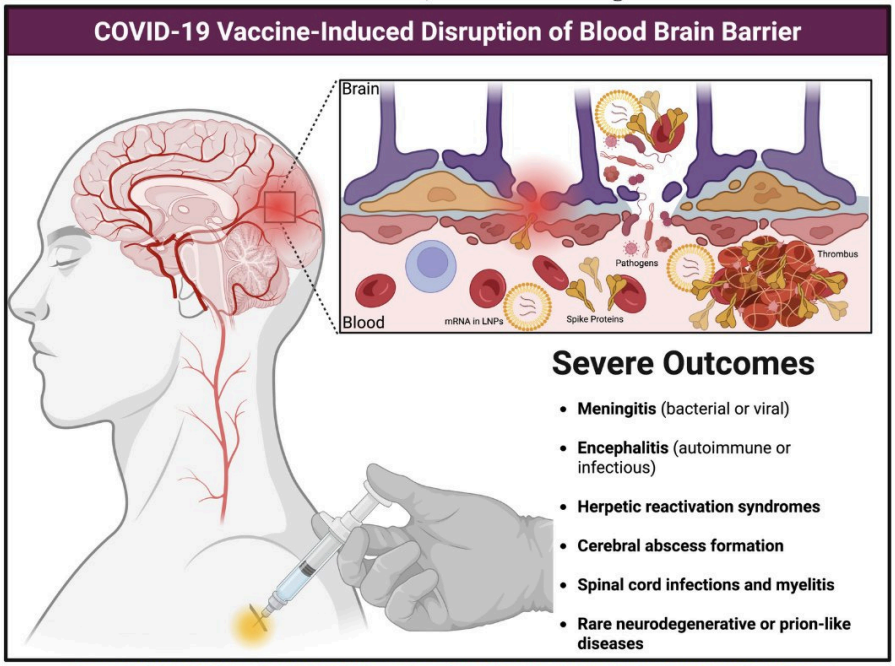

Figure 1: COVID-19 vaccine-induced disruption of the blood–brain barrier and pathogenic outcomes.

*Illustration of the proposed mechanism by which mRNA vaccine lipid nanoparticles (LNPs) and spike proteins contribute to disruption of the BBB. Once BBB integrity is compromised, pathogens, vaccine components and inflammatory mediators can enter the CNS, leading to vascular inflammation, thrombus formation, and secondary infections. Severe outcomes include bacterial or viral meningitis, autoimmune or infectious encephalitis, herpetic reactivation syndromes, cerebral abscess formation, spinal cord infections and myelitis, and rare neurodegenerative/prion-like conditions. Created with Biorender.com

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3. Psychiatric adverse events following COVID-19 vaccination: a population-based cohort study in Seoul, South Korea

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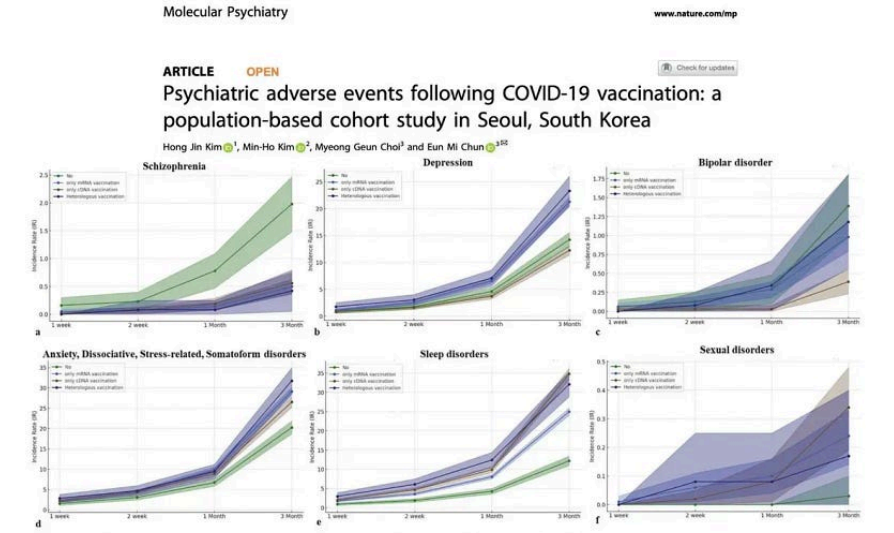
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ARTICLE OPEN
Psychiatric adverse events following COVID-19 vaccination: a population-based cohort study in Seoul, South Korea
Hong Jin Kim, Min-Ho Kim, Myeong Geun Choi and Eun Mi Chun
Schizophrenia
Depression
Bipolar disorder
Anxiety, Dissociative, Stress-related, Somatoform disorders
Sleep disorders
Sexual disorders

Fig. 2 Cumulative incidence rates of mental disorders following COVID-19 vaccination according to vaccine type. a Schizophrenia. **b** Depression. **c** Bipolar disorder. **d** Anxiety, dissociative, stress-related, and somatoform disorders. **e** Sleep disorder. **f** Sexual disorders.

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4. A potential association between COVID-19 vaccination and development of Alzheimer's disease

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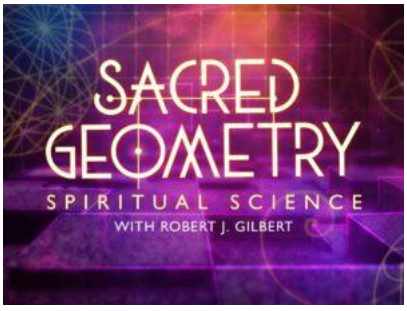

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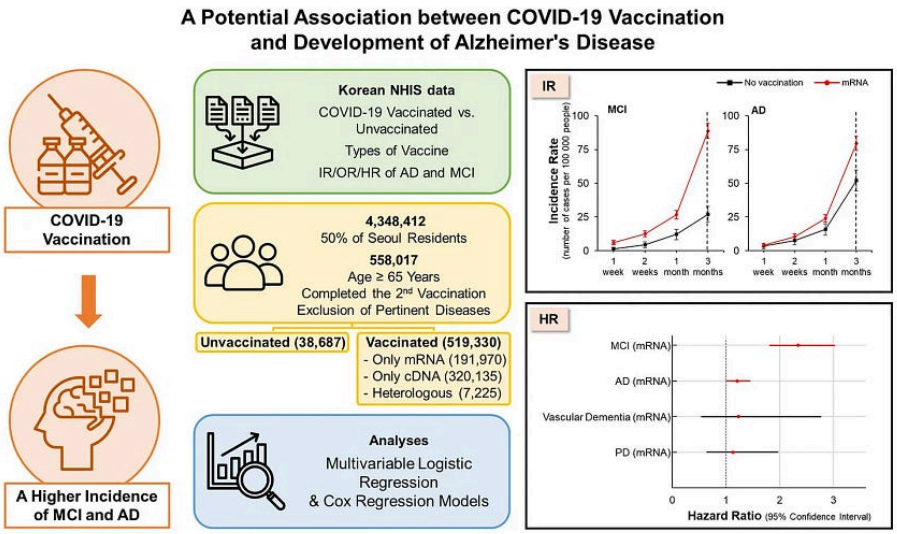

COVID-19, Coronavirus Disease 2019; NHIS, Natuonal Health Insurance Service; AD, Alzheimer's Disease; MCI, Mild Cognitive Impairment; PD, Parkinson's Disease; IR, Incidence Rrate; OR, Odds Ratio; HR, Hazard ratio.

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5. Impact of COVID-19 vaccinations on hospital admissions for neurological diseases in the Lombardia over-12 population. Data from a self-controlled case series analysis

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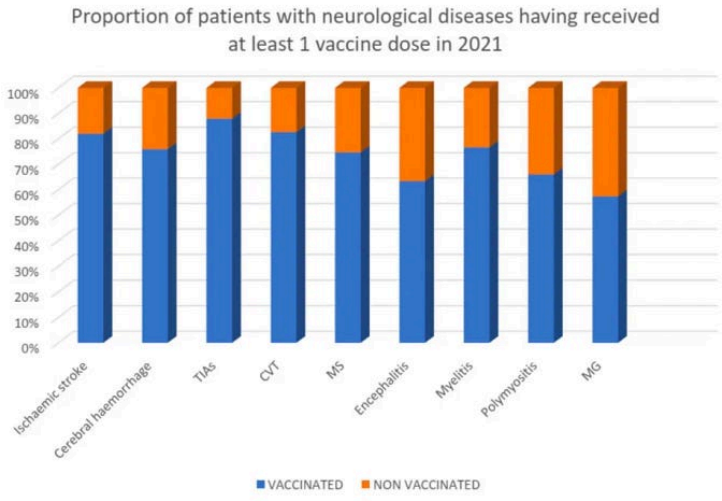
Neurological Sciences (2025) 46:25–32
https://doi.org/10.1007/s10072-024-07870-5

COVID-19

Impact of COVID-19 disease and COVID-19 vaccinations on hospital admissions for neurological diseases in the Lombardia over-12 population. Data from a self-controlled case series analysis

Andrea Salmaggi[1] · Francesco Bortolan[2] · Michele Ercolanoni[2] · Paul Stefan Vrabie[2] · Francesco Cideni[2] · Olivia Leoni[2] · Filippo Martinelli Boneschi[3]



BNT162b2 72.3% Mrna-1273 14.8% ChAdOx1nCoV-19 10.6% Ad26.CoV2.S < 1

Fig. 1 Proportion of patients with neurological diseases having received at least 1 vaccine dose in 2021

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6. COVID-19 mRNA Injection Spike Protein Expressed in Cerebral Arteries of Stroke Patients for 17 Months

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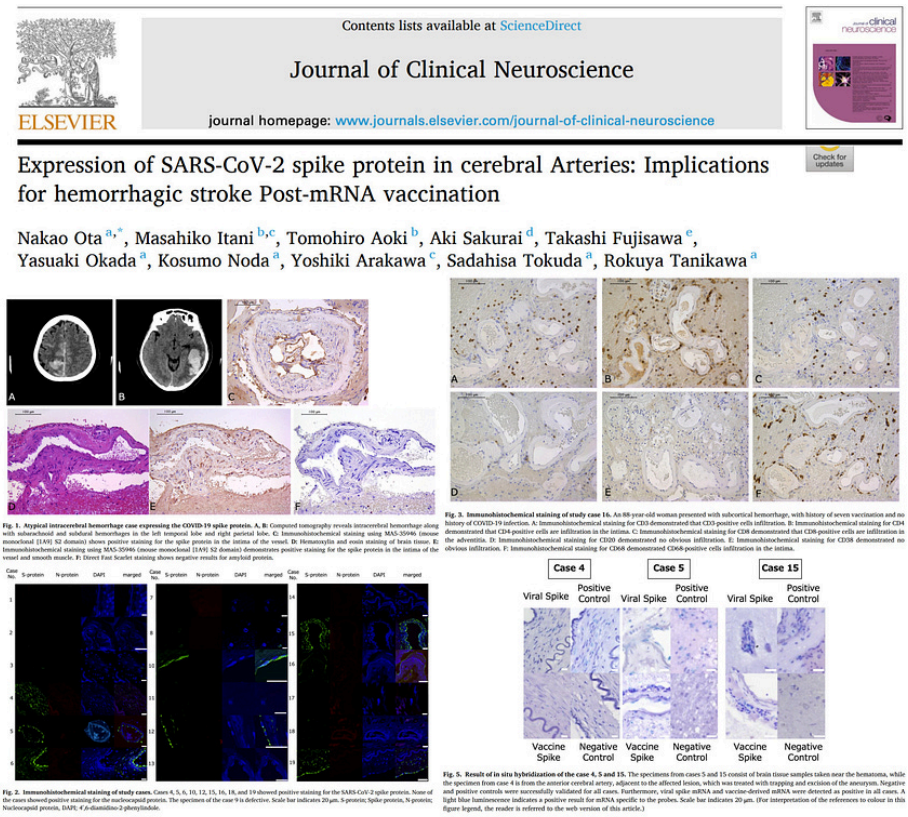

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Journal of Clinical Neuroscience

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Expression of SARS-CoV-2 spike protein in cerebral Arteries: Implications for hemorrhagic stroke Post-mRNA vaccination

Nakao Ota [a,*], Masahiko Itani [b,c], Tomohiro Aoki [b], Aki Sakurai [d], Takashi Fujisawa [e], Yasuaki Okada [a], Kosumo Noda [a], Yoshiki Arakawa [c], Sadahisa Tokuda [a], Rokuya Tanikawa [a]

Fig. 1. Atypical intracerebral hemorrhage case expressing the COVID-19 spike protein. A, B: Computed tomography reveals intracerebral hemorrhage along with subarachnoid and subdural hemorrhages in the left temporal lobe and right parietal lobe. C: Immunohistochemical staining using MAS-35946 (mouse monoclonal [1A9] S2 domain) shows positive staining for the spike protein in the intima of the vessel. D: Hematoxylin and eosin staining of brain tissue. E: Immunohistochemical staining using MAS-35946 (mouse monoclonal [1A9] S2 domain) demonstrates positive staining for the spike protein in the intima of the vessel and smooth muscle. F: Direct Fast Scarlet staining shows negative results for amyloid protein.

Fig. 3. Immunohistochemical staining of study case 16. An 88-year-old woman presented with subcortical hemorrhage, with history of seven vaccination and no history of COVID-19 infection. A: Immunohistochemical staining for CD3 demonstrated that CD3-positive cells infiltration. B: Immunohistochemical staining for CD4 demonstrated that CD4-positive cells are infiltration in the intima. C: Immunohistochemical staining for CD8 demonstrated that CD8-positive cells are infiltration in the adventitia. D: Immunohistochemical staining for CD20 demonstrated no obvious infiltration. E: Immunohistochemical staining for CD38 demonstrated no obvious infiltration. F: Immunohistochemical staining for CD68 demonstrated CD68-positive cells infiltration in the intima.

Fig. 2. Immunohistochemical staining of study cases. Cases 4, 5, 6, 10, 12, 15, 16, 18, and 19 showed positive staining for the SARS-CoV-2 spike protein. None of the cases showed positive staining for the nucleocapsid protein. The specimen of the case 9 is defective. Scale bar indicates 20 μm. S-protein; Spike protein, N-protein; Nucleocapsid protein, DAPI; 4′,6-diamidino-2-phenylindole.

Fig. 5. Result of in situ hybridization of the case 4, 5 and 15. The specimens from cases 5 and 15 consist of brain tissue samples taken near the hematoma, while the specimen from case 4 is from the anterior cerebral artery, adjacent to the affected lesion, which was treated with trapping and excision of the aneurysm. Negative and positive controls were successfully validated for all cases. Furthermore, viral spike mRNA and vaccine-derived mRNA were detected as positive in all cases. A light blue luminescence indicates a positive result for mRNA specific to the probes. Scale bar indicates 20 μm. (For interpretation of the references to colour in this figure legend, the reader is referred to the web version of this article.)

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7. Spike Protein Persists in the Skull-Meninges-Brain Axis and Causes Neurological Damage

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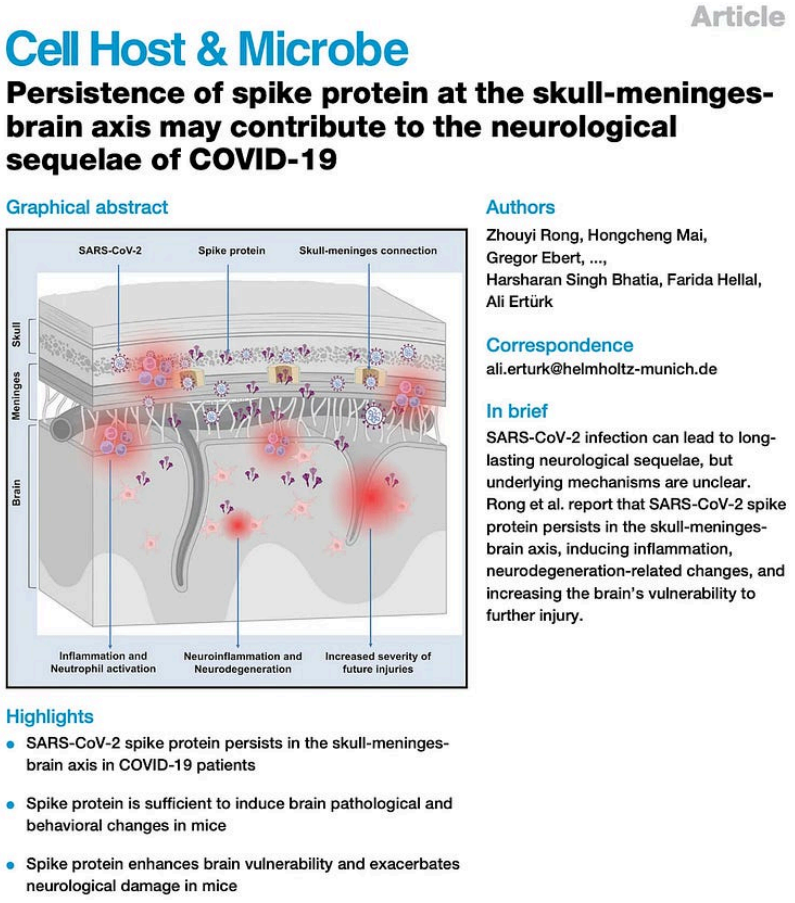

Article

Cell Host & Microbe

Persistence of spike protein at the skull-meninges-brain axis may contribute to the neurological sequelae of COVID-19

Graphical abstract

SARS-CoV-2 | Spike protein | Skull-meninges connection

Skull | Meninges | Brain

Inflammation and Neutrophil activation | Neuroinflammation and Neurodegeneration | Increased severity of future injuries

Authors

Zhouyi Rong, Hongcheng Mai, Gregor Ebert, ..., Harsharan Singh Bhatia, Farida Hellal, Ali Ertürk

Correspondence

ali.erturk@helmholtz-munich.de

In brief

SARS-CoV-2 infection can lead to long-lasting neurological sequelae, but underlying mechanisms are unclear. Rong et al. report that SARS-CoV-2 spike protein persists in the skull-meninges-brain axis, inducing inflammation, neurodegeneration-related changes, and increasing the brain's vulnerability to further injury.

Highlights

- SARS-CoV-2 spike protein persists in the skull-meninges-brain axis in COVID-19 patients
- Spike protein is sufficient to induce brain pathological and behavioral changes in mice
- Spike protein enhances brain vulnerability and exacerbates neurological damage in mice

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If the CIA was secretly discussing covert methods to alter human behavior in the 1950s, it would be no surprise if similar classified projects emerged in the decades that followed.

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13 Mar 2026 15:30

pete fairhurst 2 says:

Devastating info about the clot shots. Not really surprising given all that we know but, if this is correct then, it’s clearly a genocide

Because literally billions of first worlders who are hooked into the matrix took the needlecraft. And there will clearly be long term consequences for them and probably their descendants too

So the shots really were an intelligence test, which most folk failed. It seemed so at the time, and this proves it

Is there a source link? Can’t see it

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13 Mar 2026 18:20

ian says:

Yep there’s a source link Pete, bad to spot though.
https://www.globalresearch.ca/declassified-cia-documents-reveal-plans-control-human-behavior/5917022

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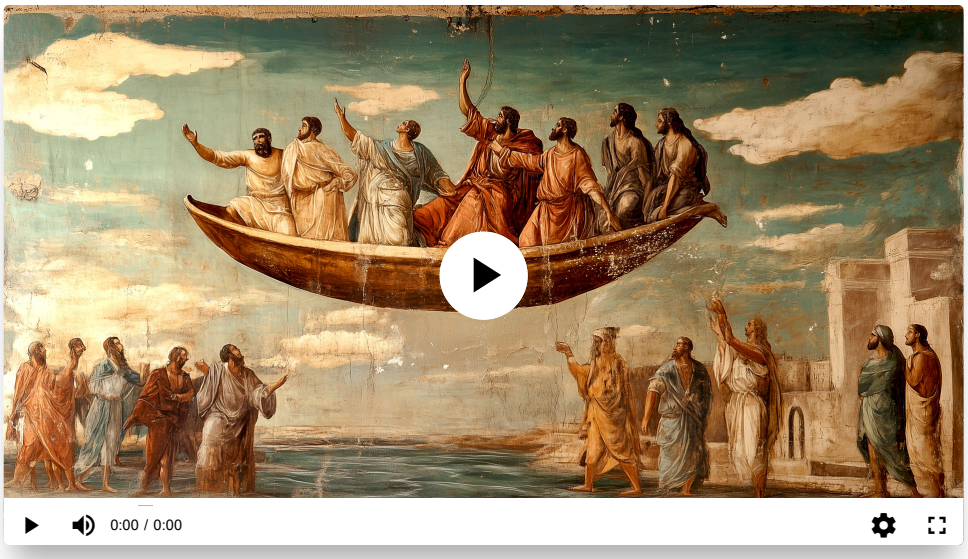

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